

JAN 10 2002

**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number 09/876,911

Filing Date June 8, 2001

First Named Inventor Mike Boucher

Group Art Unit 2681

Examiner Name Unassigned

Attorney Docket Number

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ Please change the correspondence address for the above-identified application to:☐ Customer Number

OR

Place Customer
Number Bar Code
Label here

<input type="checkbox"/> Firm or Individual Name	Matsushita Mobile Communications Development Corporation of U.S.A.				
Address	1225 Northbrook Parkway				
Address					
City	Suwanee				
Country	U.S.A.	State	GA	ZIP	30024
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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name Jim Marion, VP & COO

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.